

Governor's Office of Drug Control Policy

Agency Performance Reporting

State Fiscal Year 2012



Introduction

The Agency Performance Report for the Governor's Office of Drug Control Policy is published in accordance with the Accountable Government Act. The information provided within this report is to aid in decision-making and to illustrate accountability to stakeholders and citizens. The report is indicative of the agency's progress in meeting performance targets and achieving goals consistent with the enterprise strategic plan, the agency strategic plan and agency performance plan.

Major accomplishments of SFY 2012 included maintaining a significant reduction in the occurrence of meth labs in Iowa since the 2005 enactment of the pseudoephedrine control law and SF2343 expanded the list of bath salts and synthetic cannabinoids as controlled substances. The agency maintained the Drug Endangered Children's program (DEC) 19 counties providing a coordinated DEC response. Federal grant funds were leveraged to train communities how to coordinate DEC efforts of the public health, private health care, human service and criminal justice systems, and to protect children. Iowa ODCP also hosted the National DEC Conference in Des Moines, with 29 state delegations attending.

Iowa ranked 15th highest in the nation for methamphetamine use, the baseline data ranked Iowa 4/51, so there has been improvement. A substantial reduction of approximately 72% in the average number of meth labs per month from 2004 to 2011. 2012 data indicate a slight drop in the number of labs from the previous year. Methamphetamine still remains one of the top drugs of choice in Iowa. This is due to the ease of manufacturing the drug and Mexican drug trafficking organization smuggling the vast majority of meth into the state.

Though Iowa has seen a small rebound in meth manufacturing incidents over the last four years, implementation of Iowa's Pseudoephedrine Tracking System (PTS) in 2010 may have prevented an even larger resurgence of hazardous labs. In the two full years since implementing NPLeX, more than 48,000 illegal purchase attempts have been blocked, preventing the sale of over 281 pounds of pseudoephedrine, averting an estimated 1,000 additional meth labs.

Methamphetamine continues to be the most abused "synthetic" drug in Iowa, but the abuse of other "synthetic" drugs is an emerging concern. Prescription and over-the-counter drug abuse now appears to be the fastest growing type of substance abuse in the State, based on data sources and anecdotal evidence. The most common form of prescription abuse is the misuse of narcotic painkillers, such as hydrocodone and oxycodone. In 2011, Iowa had 62 opioid pain reliever overdose deaths. As prescription and over-the-counter drug abuse increases, so does the need for enforcement, prevention and treatment resources to address this issue.

Other new drugs of concern are synthetic designer drugs, including a growing number of synthetic cannabinoid (e.g., K2) and synthetic cathinone (a.k.a. “bath salts”) compounds. Some of the known compounds that have demonstrated a high potential for abuse and harm, and no medical value, were banned in Iowa as Schedule I Controlled Substances in 2011 and expanded upon in 2012. However, additional compounds (“cousin drugs”) with very similar properties are being discovered and abused in Iowa.

State and national surveys depict Iowa as having a relatively low rate of drug abuse, compared with other states. That’s good news, and means problems associated with drug abuse may be more manageable in Iowa than elsewhere. However, we are not without challenges that threaten the health and safety of Iowans. The number of offenses involving possession or use of marijuana has increased, and there has been an increase in number of marijuana grows. Heroin use is on the rise in Iowa, so too are heroin overdose deaths. Underage and binge drinking in Iowa remain above the national average, other “traditional” forms of drug abuse are still at unacceptably high levels, and emerging issues such as prescription and designer drug abuse demonstrate the need to adapt drug prevention, treatment and enforcement responses. Potential new drug users come of age every day, in the form of Iowa youth, requiring persistent drug control efforts that keep pace with new trends.

Funding limitations and a reduction of staff are a continuing challenge facing the agency and the programs it supports through federal grants. Due to reductions in federal and state funding, it is increasingly important for ODCP to work with federal officials to identify federal grant funding vital to Iowa’s drug control efforts.

At a time of shrinking resources, ODCP’s role is more essential to coordinate and prioritize state and local agency efforts, and focus on efficiencies that can be gained from that coordinated effort. ODCP’s FY13 general fund appropriation was reduced 17% and FTE’s were reduced 50%. Current efficiencies include program support from the Iowa National Guard, the Department of Public Safety, and Non-Profit Organizations. Through this reorganization, Iowa ODCP will be able to push over \$311,000.00 of net savings out to grant recipients.

One way ODCP coordinates efforts in communities throughout the State is through the Iowa Drug Control Strategy, a blueprint for action that is updated annually. We invite all citizens, businesses, and non-profit organizations in Iowa to join with ODCP and our local, state and federal partners in developing and effectively executing this strategy.

Sincerely,

Steven F. Lukan, Director
Governor’s Office of Drug Control Policy

Overview

MISSION STATEMENT

- The Mission of the Governor’s Office of Drug Control Policy is to serve as a leader and a catalyst for improving the health and safety of all Iowans by promoting strategic approaches and collaboration to reduce drug use and related crime.

VISION STATEMENT

- The Vision of the Governor’s Office of Drug Control Policy is to empower Iowa citizens, organizations, and policy makers to cultivate safe and drug free communities.

GUIDING PRINCIPLES

- | | |
|------------------|-------------------|
| • Accountability | • Efficiency |
| • Collaboration | • Fairness |
| • Coordination | • Honesty |
| • Effectiveness | • Innovation |
| • Integrity | • Leadership |
| • Service | • Trustworthiness |

ODCP Code of Ethics

The primary obligation of ODCP, its staff and program stakeholders is to serve the public. As such, ODCP and its associates shall operate professionally, truthfully, fairly and with integrity and accountability to uphold the public trust.

The Drug Policy Coordinator and the Office of Drug Control Policy strive to improve the health and safety of all Iowans by working with several organizations to initiate and coordinate policies and programs that address the complexities of substance abuse and drug trafficking. ODCP administers federal grant funds in a highly credible, fundamentally fair, and transparent manner. The agency also takes a leadership role in alerting the public to important substance abuse and drug trafficking issues, and is a reliable information source for policy makers.

Major services and products of ODCP are:

- Coordination of policies, programs and resources involving state, federal and local agencies to strategically address substance abuse in Iowa.
- Procurement and administration of federal grant program funding and other resources to strengthen local and state drug enforcement and treatment efforts focusing primarily on criminal offenders in Iowa, and to enhance substance abuse prevention efforts at the community level.
- Public Policy & Education (educate the public about emerging substance abuse issues, and advise elected officials on policy matters, propose legislative changes to address current and emerging threats.)

Through a comprehensive website, we also provide customer access to major services, such as the annual Iowa Drug Control Strategy, Strategic Plan, Agency Performance Plan, grant application opportunities, programs and other resources. These services are found on the ODCP website at www.iowa.gov/odcp.

The Office of Drug Control Policy is a department within the executive branch of State Government. The agency is established in Iowa Code Chapter 80E. The Coordinator directs the Governor's Office of Drug Control Policy; coordinates and monitors all statewide counter-drug efforts, substance abuse treatment grants and programs, and substance abuse prevention and education programs; and engages in other related activities involving the Departments of public safety, corrections, education, public health and human services. The coordinator assists in the development of local and community strategies to fight substance abuse, including law enforcement, education, and treatment activities.

During fiscal year 2012, ODCP had eight full-time employees. The agency operating budget appropriation was reduced 17% to \$290,000, \$168,154 in fees/fines was collected, \$6.4 million in federal expenditures, and \$26,804 in interest earnings.

KEY RESULTS

Strategic Goal

Name: Enhance coordination and leadership to improve Iowa's response to drug use and related crime.

Description: Initiate innovative approaches and embed promising or proven techniques to reduce the supply of and demand for illegal drugs.

Why we are doing this: Drug abuse in Iowa has been compounded in recent years by the demand for, and supply of, highly addictive methamphetamine. Users of this drug can be prone to violence and child neglect. State legislation to control the key ingredient (PSE) used to make meth, appears to be having the intended effect of curbing meth labs, and their accompanying hazards, in Iowa. Very significant challenges remain, including stemming a recent resurgence in meth labs, reducing the out-of-state supply of meth and the demand by Iowans who use it, plus other forms of substance abuse that have not subsided.

The newest and fastest growing form of substance abuse by Iowans involves other synthetic drugs: including prescription and over-the-counter medicines and a growing number of synthetic designer drugs often referred to as K2 and Bath Salts. Teenagers tend to view these drugs as "safe", and many parents are unaware of their potential for abuse. According to the 2010 Iowa Youth Survey, 7% of Iowa 11th graders have used prescription drugs for non-medicinal purposes.

What we're doing to achieve results: ODCP is monitoring the effectiveness of Iowa's pseudoephedrine control law, which together with other strong prevention and enforcement efforts has contributed to a significant drop in meth labs. Since enacting the nation's strongest non-prescription pseudoephedrine control law in 2005, and in spite of modest resurgence over the last couple of years, meth lab incidents have declined approximately 72% to an average of 34/month in 2011. In 2012, Iowa is averaging 29 labs/month versus 125/month in 2004, when DEA records indicated Iowa recorded the 3rd highest number of meth lab responses of any state in the U.S.

In response to an uptick in meth labs during the last two years, ODCP has implemented a statewide electronic Pseudoephedrine Tracking System (PTS) to detect and deter illegal over-the-limit purchases on a real-time basis. Legislation to create the new database was approved in 2009, in response to "smurfing," or the practice of meth cooks buying small amounts of pseudoephedrine from several different pharmacies in an effort to circumvent PSE purchasing restrictions. In its first 12 months of operation, the PTS blocked enough illegal purchase attempts in Iowa to prevent the manufacture of an estimated 113 pounds of meth and avert as many as 450 more labs. Still, 34 meth labs per month-or nearly one every 21 hours is too much. The PTS may help investigators find more labs in the short term, but the ultimate goal is to deter and prevent as much meth manufacturing as possible in Iowa.

In 2012 the Iowa Legislature passed and Governor Branstad signed into law, perhaps the strongest legislation in the nation combating synthetic drugs. SF2343 updating Iowa's list of controlled substances. This measure will expand the State ban of synthetic drugs, sold as incense or bath salts under names such as Spice and Ivory Wave. Our state law has become a model for others and was also adopted in part on the national level.

In May 2012 the ODCP and the Partnership for a Drug-Free Iowa launched a public education campaign, "Speak Out Against Synthetic Drugs" to help parents and other key influencers talk with kids.

A community prevention education program was designed to deal with existing drug issues and rapidly respond to emerging drug threats. The goal is to help reduce illicit drug use and its accompanying criminal behavior thereby improving the safety and quality of life in Iowa communities.

In January 2012, ODCP released the first State Strategy to address prescription drug abuse in Iowa. Organizing began for the formation of a special task force to address the increasing incidence of prescription drug abuse. The goal of the task force is to define the nature and scope of the nation's fastest growing substance abuse problem as it relates to Iowa communities and recommend steps to reduce its impact on Iowans.

ODCP was recently successful in receiving a US Dept of Justice grant award for Mental Health/Drug Courts statewide in cooperation with the Department of Corrections and the Iowa Judicial Branch.

Results

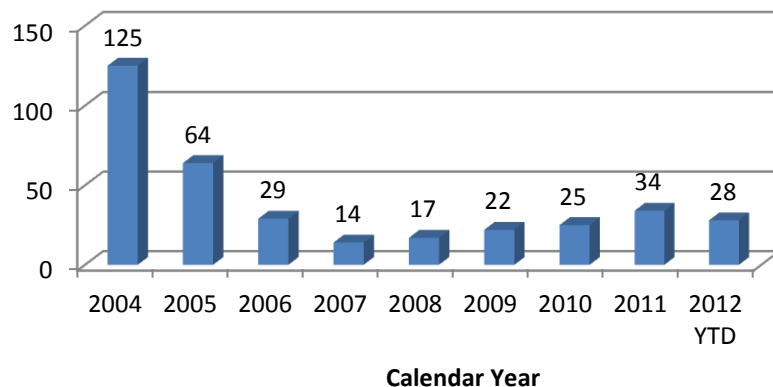
Performance Measure: State Rank in overall rate of meth use.

Performance Goal/Target:

Target/Goal for state rate of meth use is 10/51.

Reduce the incidence of clandestine methamphetamine lab sites 50%.

**Iowa Meth Lab Incidents
Monthly Averages**



Data Source: DPS/DNE

What was achieved: 2006 was the first full year of Pseudoephedrine control (SF 169 was signed into law 3/22/05, effective 5/21/05). Meth lab incidents had declined 77% (comparing data for 2006 vs. 2004) and continued to drop significantly. During 2007, meth lab incidents declined 89% vs. 2004. At close of 2008, meth lab incidents were still down significantly (84%), however, a rise in labs was seen for the first time since 2004. 2009 lab incident numbers followed the increase to 22 incidents monthly, 2010 incident numbers increased to 27 incidents monthly, 2011 incidents increased to 34 monthly, and 2012 has slightly decreased to 28 incidents monthly.

Data Sources: Department of Public Safety, Division of Narcotics Enforcement

Resources: Local program match \$1.3 million and Federal Grant Funds \$4.456 million.

KEY RESULT

Service/Product/Activity

Name: Community Coordination and Development

Description: Increase outreach to vulnerable populations in rural communities.

Why we are doing this: Too often, and many times hidden from public view, vulnerable children are unwitting victims of illegal drug use and manufacturing. Children who live in drug environments and whose parents/caregivers abuse drugs may be subjected to physical and verbal abuse, and neglect.

Over the last five years, 4,803 cases of abuse involving drug-affected children (children testing positive for any illegal drug in their system) have been reported to the Iowa Department of Human Services. In 2008, the number of Iowa child abuse cases in which illegal drugs were found in a child's body totaled 633, a 63% reduction from 1,713 in 2004.

With the increase in meth treatment and incidence of meth labs, in 2010 the number of Iowa child abuse cases in which illegal drugs were found in a child's body increased 20% to 827, and another slight increase to 861 was seen in 2011. Some of these cases involved children found in or near hazardous meth labs or chemicals used to make meth. Many more were exposed to other dangerous drugs.

Additionally, more than 1000 children over four years (2002-2005) were classified by DHS as victims of abuse due to their proximity to hazardous methamphetamine labs and/or meth precursor chemicals. The number of these cases declined by 63% in 2008 to 110 compared to 299 in 2004. 2008 cases were nearly double the 2007 count of 56. And with meth lab incidents increasing, increases in child victims of abuse due to exposure to meth labs would also be expected to increase. 2010 and 2011 cases nearly double the 2009 founded cases of 86.

What we're doing to achieve results: ODCP is working with local and state organizations to enhance Iowa's Drug Endangered Children (DEC) program. Nineteen local multi-disciplinary DEC teams have been formed in Polk, Appanoose, Dubuque, Linn, Wapello, Woodbury, Pottawattamie, Clay, Story, Cherokee, Clinton, Des Moines, Marshall, Mills, Boone, Fremont, Jasper, Wright and Buena Vista Counties. These DEC Teams were formed to leverage and coordinate resources of the public health, private health care, human service and criminal justice systems, to protect children and hold abusers accountable. When appropriate, the program also strives to assist families in obtaining substance abuse treatment.

Results

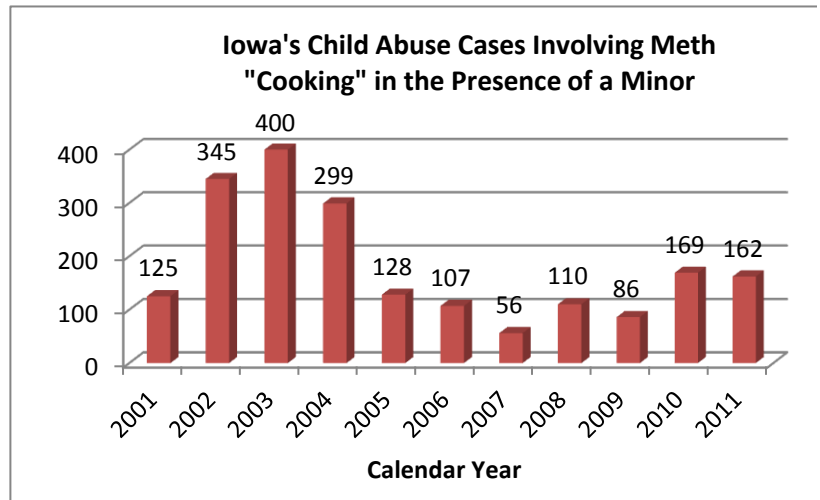
Performance Measure:

Initiation of new programs that create increased effectiveness or efficiencies.

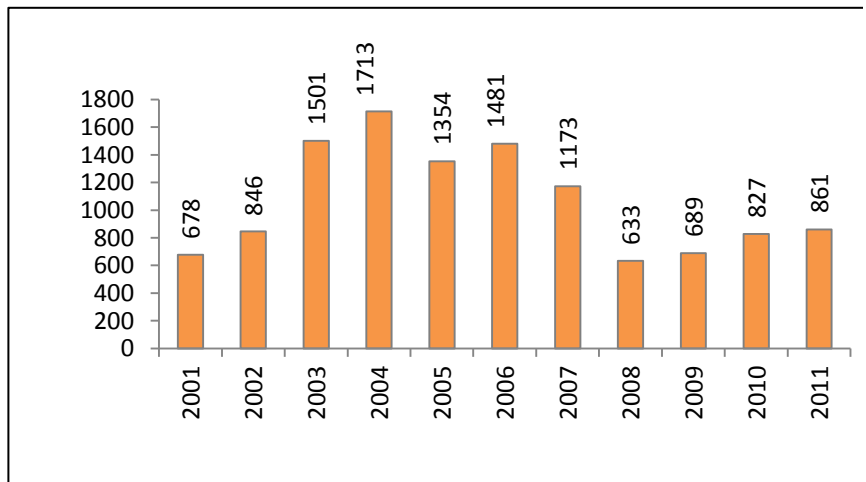
Multi-disciplinary Drug Endangered Children Response Teams.

Performance Goal/Target:

Twenty Multi-disciplinary DEC Response Teams will be formed.



Presence of an Illegal Drug In Child's Body (Confirmed Child Abuse, DHS-CYs)



What was achieved: Nineteen DEC teams were maintained. These DEC teams were formed to leverage and coordinate resources of the public health, private health care, human service and criminal justice systems, to protect children and hold abusers accountable. DEC Team protocols have been established and DEC teams received training. Nine Core DEC trainings were held across the state. ODCP assisted the National Alliance Against Drug Endangered Children with plans for Iowa to be the host state for the National DEC Conference. When appropriate, the program also strives to assist families in obtaining substance abuse treatment.

Data Sources: Iowa Department of Human Services

Resources: Federal Grant Funds \$150,000.

AGENCY PERFORMANCE PLAN RESULTS FY 2012

Name of Agency: Governor's Office of Drug Control Policy			
Agency Mission: To serve as a leader and a catalyst for improving the health and safety of all Iowans by promoting strategic approaches and collaboration to reduce drug use and related crime.			
Core Function: Advocacy			
Performance Measure (Outcome)	Performance Target	Performance Actual	Performance Comments & Analysis
1. National Rank of Illicit Drug Use in the past 30 days.	50/51	50/51	<p>What Occurred: Enhanced coordination and leadership to improve Iowa's response to drug use and related crime.</p> <p>Data Source: ODCP, Drug Policy Advisory Council SAMHSA Office of Applied Studies, 2006 - 2007 National Survey on Drug Use and Health, State Estimates of Substance Use.</p>
2. National Rank of Methamphetamine Use in the past 30 days.	10/51	15/51	<p>What Occurred:</p> <ul style="list-style-type: none"> Improved public policy through passage of the Pseudoephedrine Control Legislation, significantly reducing the occurrence of meth labs in Iowa by 72%. As authorized by legislation, ODCP implemented a statewide electronic pseudoephedrine sales tracking system. Improved public policy through passage of SF2343, expanding upon the banned synthetic drugs (cannabinoids, bath salts, and salvia divinorum/salvinorin A) Speak Out Against Synthetic Drugs campaign to help parents and key influencers talk to kids about the dangers of synthetic drugs. National Rank of Methamphetamine use changed from 4th highest in the nation to 15th highest in the nation. Developed an on-line version of "Life or Meth", a meth educational program targeting 5th and 6th grade students in Iowa and five surrounding Midwestern states. <p>Data Source: ODCP SAMHSA Office of Applied Studies, 2006 - 2007 National Survey on Drug Use and Health, State Estimates of Substance Use.</p>

Service, Product or Activity: Drug Control Policy Guidance & Program Coordination			
Performance Measure	Performance Target	Performance Actual	Performance Comments & Analysis
1. Percent of state agencies Coordinated	90%	100%	<p>What Occurred: Increased collaboration among state agencies to identify and refine drug control priorities. A comprehensive and collaborative statewide drug control strategy was developed and implemented to coordinate efforts and maximize the utilization of resources between state, federal, and local agencies. (reference: http://www.iowa.gov/odcp/)</p> <p>Data Source: ODCP</p>
3. # Multi-Disciplinary Drug Endangered Children Response Teams	20	19	<p>What Occurred: Funding was secured for maintenance of the DEC Teams.</p> <ul style="list-style-type: none"> • Nineteen DEC Teams were maintained, which integrate the criminal justice system's response with the medical community and DHS to protect children, hold parents accountable, and break the cycle of addiction and abuse. • 11 DEC trainings were held across the state. One statewide DEC conference was held, and planning began for Iowa as the host state to the 2012 National DEC Conference. • Project Safe Neighborhoods (PSN) provides enforcement and prosecution of state and federal gun laws in seven targeted Iowa counties/communities. It also provides anti-gang enforcement and education. • Coordinated with the National Guard, Not for profit organization and Iowa citizens
4. % of Students Self-Reporting Current Drug Use	8%	11%	Results of the 2010 Iowa Youth Survey indicate that current illegal drug use showed a slight increase from 10% in the 2002 survey. The target was 8.
5. % of Students Self-Reporting Current Alcohol Use	21%	17%	Results of the 2010 Iowa Youth Survey indicate that current alcohol use is down to 17%. A reduction from 23% in the 2002 baseline survey.
6. % of Students Self-Reporting	12%	11%	Results of the 2010 Iowa Youth Survey indicate that current tobacco use has

Current Tobacco Use			declined to 11%. A reduction of 2% points from the 2002 baseline survey.
7. Number of Clandestine Methamphetamine Lab Incidents Statewide	300	412	To initiate and implement effective policy development and improve public safety's response to current and emerging needs. Pseudoephedrine Controls reduced the number of average meth lab incidents per month by 72%. The benchmark goal was a 50% reduction from 2004 incidents of 1500 by end of calendar year 2006. This original target has been greatly exceeded.

AGENCY PERFORMANCE PLAN RESULTS FY 2012

Core Function: Community Coordination and Development			
Performance Measure (Outcome)	Performance Target	Performance Actual	Performance Comments & Analysis
1. Percent of Iowa counties receiving services from ODCP.	75% of Iowa counties are served by performance based ODCP grant funded programs.	100%	What Occurred: Improve the ability of state and local government and private partners to enforce drug laws and provide substance abuse prevention and treatment services. Data Source: ODCP
Service, Product or Activity: Drug Control Program Development & Evaluation			
Performance Measure	Performance Target	Performance Actual	Performance Comments & Analysis
1. Percent of Iowa Counties Served by ODCP funded multi-jurisdictional drug enforcement task forces.	70%	66%	What Occurred: <ul style="list-style-type: none"> 20 Drug Task Forces provided services in 69 Iowa counties to reduce the availability of illicit drugs. 20 federal grant supported drug task forces supported 58.5 state and local law enforcement positions. Data Source: ODCP
2. Percent of Drug Affected Offenders Complete ODCP Funded Substance Abuse Treatment	75%	80%	What Occurred: <ul style="list-style-type: none"> 80% of offenders receiving ODCP funded treatment successfully completed the programs. The substance abuse treatment program at the State Training School reported a 92% successful discharge rate. Secured federal grant funds to implement Mental Health/Drug Courts statewide.

			Data Source: ODCP
3. Percent of ODCP funded projects monitored for project effectiveness and financial compliance.	100%	100%	What Occurred: <ul style="list-style-type: none"> • ODCP maintained adequate control procedures to ensure that public resources were used effectively. ODCP's annual audit contained no comments or findings. • Electronic Grant Management System was implemented to aid in monitoring project results and financial compliance. • 100% of ODCP Grants are managed through the electronic grant system.